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TRANSMITTAL FORM

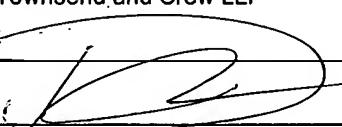
(to be used for all correspondence after initial filing)

		Application Number	10/750,982
		Filing Date	January 2, 2004
		First Named Inventor	Musolf, Tom
		Art Unit	Unassigned
		Examiner Name	Unassigned
Total Number of Pages in This Submission	4	Attorney Docket Number	020824-003512US

ENCLOSURES (Check all that apply)

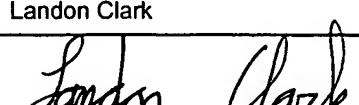
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard References AP and AQ
		Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

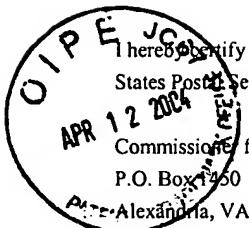
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Patrick R. Jewik	
Signature		
Date	April 8, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Signature		Date	April 8, 2004



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PATENT
Attorney Docket No.: 020824-003512US
Client Reference No.: 157.01

On 4-8-04

TOWNSEND and TOWNSEND and CREW LLP

By: London Clark

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Tom Musolf, et al.

Application No.: 10/750,982

Filed: January 2, 2004

For: ELECTROGRAPHIC POSITION
LOCATION APPARATUS INCLUDING
RECORDING CAPABILITY AND
DATA CARTRIDGE INCLUDING
MICROPHONE

Examiner: Unassigned

Art Unit: Unassigned

**INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner. Copies of the references AP and AQ are enclosed. In accordance with the USPTO's decision to waive the requirement under 37 CFR 1.98 (a)(2)(i) for U.S. patents and published patent applications for all U.S. national patent applications filed after June 30, 2003, applicant has not submitted copies of references AA-AO.

It is respectfully requested that the all references cited on the attached PTO/SB/08B be expressly considered during the prosecution of this application, be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

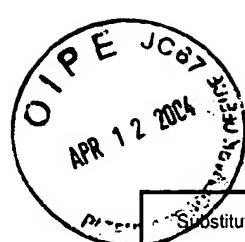
Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Patrick R. Jewik
Reg. No. 40,456

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60189007 v1



Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary).

			<i>Complete if Known</i>	
			Application Number	10/750,982
			Filing Date	January 2, 2004
			First Named Inventor	Musolf, Tom
			Art Unit	Unassigned
			Examiner Name	Unassigned
Sheet	1	of	1	Attorney Docket Number
				020824-003512US

U.S. PATENT DOCUMENTS+

Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
AA	US-5,419,705		05-30-1995	Sandvik	
AB	US-5,437,552		08-01-1995	Baer et al.	
AC	US-5,466,158		11-14-1995	Smith, III	
AD	US-5,485,176		01-16-1996	Ohara et al.	
AE	US-5,511,980		04-30-1996	Wood	
AF	US-5,531,600		07-02-1996	Baer et al.	
AG	US-5,574,519		11-12-1996	Manico et al.	
AH	US-5,575,659		11-19-1996	King et al.	
AI	US-5,636,995		06-10-1997	Sharpe, III et al.	
AJ	US-5,707,240		01-13-1998	Hass et al.	
AK	US-6,608,618		08-19-2003	Wood et al.	
AL	US-6,641,401		11-04-2003	Wood et al.	
AM	US-6,661,405		12-09-2003	Flowers	
AN	US-6,668,156		12-23-2003	Lynch et al.	
AO	US-2003/0162162 A1		08-28-2003	Margraff	
	US-				
	US-				

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ Number ⁴ Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
AP	WO	87/06752	A1	11-05-1987	Mee et al.	<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	AQ	"Fundamentals of Reading: A Parent's Guide to using the Record 'n Learn™ Pad learning toy," 9 pages; VTECH.	

Examiner Signature	Date Considered
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¹ EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

² Applicant's unique citation designation number (optional). ³ Applicant is to place a check mark here if English language Translation is attached.